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IDT

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FAX COVER SHEET

TO: ISSUE FEE PAYMENT U.S. P.T.O.	From: Christopher Novak Intellectual Property Counsel
Tel. N/A	Tele: 408-360-1576
Fax: 571-273-2885	Date: December 16, 2005
Sheets: Cover + 5	
RE: <u>Issue Fee Payment; App. S/N 09/865,258 Filed 05/25/2001</u> <u>First Named Inventor: Matthew Ornes, Attorney Docket # ZCOM.003US0,</u> <u>IDT File # 1958</u>	

Message:

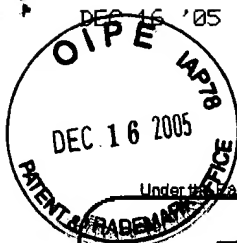
Please find attached:

- 1. Part B-Issue Fee Transmittal + Duplicate**
- 2. Change of Correspondence**
- 3. "Fee Address" Indication Form**
- 4. Transmittal Form**

Thank you.

Christopher Novak
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PTO/SB/21 (08-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/885,258
	Filing Date	05/23/2001
	First Named Inventor	Matthew D. Omas
	Art Unit	2851
	Examiner Name	Bob A. Phunkuh
Total Number of Pages in This Submission	Attorney Docket Number	ZCOM.003US0

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): "FEE ADDRESS" INDICATION FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	CHRISTOPHER NOVAK, REG. NO. 42,041
Signature	<i>Christopher Novak</i>
Date	16-DEC-2005

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Typed or printed name	JULIE BLYTHE CHRISTOPHER NOVAK,	
Signature	<i>Christopher Novak</i>	Date 16-DEC-2005

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